

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

File with:  
 Iowa Ethics and Campaign  
 Disclosure Board  
 510 E. 12<sup>th</sup>, Ste 1A  
 Des Moines, Iowa 50319  
 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.  
 Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

2010 OCT 19 PM 4:03

**COMMITTEE NAME** (Must be same as on Statement of Organization)

**Starling For Supervisor**

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
 Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC  
 (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name  
**Dennis Starling**

Political Party (if applicable)  
**Democrat**

Office Sought  
**County Supervisor**

District (if Senate or House)

**FORM**

**DR-2**

(Rev. 12/2009)

**DISCLOSURE  
 REPORT**

**For Office Use Only**

Comm. # \_\_\_\_\_  
 Logged In \_\_\_\_\_  
 Scanned \_\_\_\_\_  
 Computer \_\_\_\_\_  
 Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

*Dennis Starling*  
 SIGNATURE OF PERSON FILING REPORT

563-246-2624  
 TELEPHONE

10/19/2010  
 DATE SIGNED

I AM FILING A October 19, 2010 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
 (You must continue to file reports until a DR-3 is filed.)

Local Committee, enter Date of Election

**November 2, 2010**

County & Local Committee, enter County in  
 which Election is held  
**Clinton**

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

-0-

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below)

825.00

Schedule F: Loans Received total (Attach Schedule F)

400.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL**

1,225.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1,010.15

Schedule F: Loan Repayments total (Attach Schedule F)

-0-

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

214.85

**UNPAID BILLS** (From Schedule D - Attach Schedule D)

-0-

**IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

394.24

**OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

400.00

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES X NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

-0-

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTSCHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Starling For Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 88B.32A(5) prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND RAISER INCOME
8/19/10	ID# 8262 CK# 2041	Iron Workers Local 111 8000 29th St W. Rock Island, IL 61201	None	\$ 300.00	<input type="checkbox"/>
9/05/10	ID# CK# 5433	David Keefer 752 Breezy Pt. Dr Clinton, IA 52732	None	25.00	<input type="checkbox"/>
9/11/10	ID# 6244 CK# 270	Clinton Labor Congress P.O. Box 461 Clinton, IA 52732	None	200.00	<input type="checkbox"/>
9/21/10	ID# CK# 2200	Clinton Co. Democratic Central Comm P.O. Box 1713 Clinton, IA 52732	None	100.00	<input type="checkbox"/>
10/15/10	ID# CK# Cash	Sally Starling P.O. Box 218 Calamus, IA 52729	Wife	200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 825.00

TOTAL (if last page of this schedule)

\$ 825.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF</b> <b>AMENDING FORM</b>	

**COMMITTEE NAME (Must be same as on Statement of Organization)**
**Starling For Supervisor**

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/13/10	ID# CK# 101	My Campaign Store P.O. Box 569 Jeffersonville, IN	Yard Signs	\$ 615.29
10/05/10	ID# CK# 102	DeWitt Observer P.O. Box 49 DeWitt, IA 52742	Newspaper Ad	126.20
10/14/10	ID# CK# 103	Clinton Herald 221 6th Ave S. Clinton, IA 52732	Newspaper Ad	268.66
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1010.15
TOTAL (If last page of this schedule)				\$ 1010.15

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Starling For Supervisor

Report Form

SCHEDULE <b>E</b> (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
6/16/10	Dennis Starling P.O. Box 218 Calamus, IA 52729	Self	Parade Candy	\$ 29.87	<input type="checkbox"/>
7/02/10	Same as Above	Self	Parade Candy	25.55	<input type="checkbox"/>
7/04/10	Same as Above	Self	Parade Candy	45.20	<input type="checkbox"/>
7/14/10	Same as Above	Self	Parade Candy	12.33	<input type="checkbox"/>
8/8/10	Same as Above	Self	Parade Candy	57.84	<input type="checkbox"/>
9/1/10	Same as Above	Self	Cowboy Cards	23.45	<input type="checkbox"/>
10/14/10	Same as Above	Self	KROS Radio Ads	200.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 394.24	
TOTAL (If last page of this schedule)				\$ 394.24	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

 Page 1 of 1  
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

**RESET**

COMMITTEE NAME (Must be same as on Statement of Organization)

Starling For Supervisor

SCHEDULE

**F**

(Rev. 02/08)

LOANS  
RECEIVED  
& REPAY☐ CHECK THIS BOX IF  
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ -0-

## PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT OF LOAN
9/13/10	Dennis Starling P.O. Box 218 Calamus, IA 52729	Self	\$ 400.00

TOTAL (PART I) \$ \_\_\_\_\_

## PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (if Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$ -0-

From Schedule E - TOTAL LOANS FORGIVEN \$ -0-

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 400.00

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page 1 of 1  
(for Schedule F)